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USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

PLAINTIFF STEVE JACKSON	COURT CASE NUMBER 08 C 2520
DEFENDANT SHERIFF TOM DART, ETAL.	TYPE OF PROCESS SUMMONS & COMPLAINT

SERVE AT NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
 ROSHONDA CARROLL, SUP. CRW - SOCIAL WORKER AT COOK COUNTY JAIL
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 2700 SOUTH CALIFORNIA AVENUE - CHICAGO, IL 60608, legal dept. 2nd fl. Div 5

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

STEVE JACKSON - #2006-0060297
 COOK COUNTY JAIL
 P.O. BOX 089002
 CHICAGO, ILLINOIS 60608

Number of process to be
served with this Form 285

1

Number of parties to be
served in this case

11

Check for service
on U.S.A.

X

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses,
 All Telephone Numbers, and Estimated Times Available for Service):

FILED

Fold

Fold

AUG 05 2008 RC

MICHAEL W. DOBBINS

CLERK, U.S. DISTRICT COURT

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

06-10-08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total
 number of process indicated.
 (Sign only for USM 285 if more
 than one USM 285 is submitted)

Total Process

8 of 11

District of
Origin

No. 24

District to
Serve

No. 24

Signature of Authorized USMS Deputy or Clerk

RT.

Date

06-10-08

I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described
 on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

Ronna Farnando

☐ A person of suitable age and discretion
 then residing in defendant's usual place
 of abode

Address (complete only different than shown above)

Date

7/21/08

Time

12

☐ am☒ pm

Signature of U.S. Marshal or Deputy

P. B.

Service Fee

Total Mileage Charges
including endeavors

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal* or
(Amount of Refund*)

REMARKS

ONE Service fee charged same case + location. See process
 sheet # 2 for charges.

PRINT 5 COPIES:

1. CLERK OF THE COURT

2. USMS RECORD

3. NOTICE OF SERVICE

4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment,
if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
 Rev. 12/15/80
 Automated 01/00